

1.) CORPORATION NAME:

**SAFE HARBOR**

DUE DATE: **10/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ATTORNEY**

**KEVIN J BUCKLEY**

**RIVERFRONT PLAZA EAST TOWER**

**951 E BYRD ST**

SCC ID NO: **05101530**

5.) STOCK INFORMATION

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| CLASS | AUTHORIZED |
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**RICHMOND, VA 23219-4074**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 17996

CITY/ST/ZIP: RICHMOND, VA 23226-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

OFFICER

DIRECTOR

NAME: KAREN BUCHANAN  
TITLE: PRESIDENT  
ADDRESS: 1149 LEES CROSSING COURT  
CITY/ST/ZIP/CO: GLEN ALLEN, VA 23059-

OFFICER

DIRECTOR

NAME: CATHERINE HILL  
TITLE: VICE PRESIDENT  
ADDRESS: 4206 BROMLEY LANE  
CITY/ST/ZIP/CO: RICHMOND, VA 23221-

OFFICER

DIRECTOR

NAME: TERRY SHERMAN  
TITLE: TREASURER  
ADDRESS: 10321 AVENHAM WAY  
CITY/ST/ZIP/CO: RICHMOND, VA 23233-

OFFICER

DIRECTOR

NAME: FRANCINE BARR  
TITLE: DIRECTOR  
ADDRESS: 5235 DRYSTACK LANE  
CITY/ST/ZIP/CO: GLEN ALLEN, VA 23059-

OFFICER

DIRECTOR

NAME: KAY CONGDON  
TITLE: DIRECTOR  
ADDRESS: 100 MANAKIN PARKE DR.  
CITY/ST/ZIP/CO: MANAKIN-SABOT, VA 23103-

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| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | MARGARET GUTIERREZ-LEAVELLE<br>DIRECTOR<br>9454 DEER STREAM DR<br>MECHANICSVILLE, VA 23116-        | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | ANGELA HAYES<br>DIRECTOR<br>2006 BREMO RD<br>SUITE 201<br>RICHMOND, VA 23226-                      | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | KIMBERLY SANCHEZ<br>DIRECTOR<br>2006 BREMO RD<br>SUITE 201<br>RICHMOND, VA 23226-                  | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | CLAIRE SHEPPARD<br>DIRECTOR<br>6 SWANEE COURT<br>ASHLAND, VA 23005-                                | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | KIMBERLY SKIBA<br>DIRECTOR<br>10107-B PALACE WAY<br>RICHMOND, VA 23238-                            | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | SUSAN THWEATT<br>DIRECTOR<br>6515 MONUMENT AVE<br>RICHMOND, VA 23226-                              | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | MICHAEL WRISTON<br>DIRECTOR<br>2130 GALLOWAY TERRACE<br>MIDLOTHIAN, VA 23113-                      | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | JAYNE PEMBERTON<br>DIRECTOR<br>SANDS ANDERSON, PC<br>P.O. BOX 1998<br>RICH, VA 23218-              | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME:<br>TITLE:<br>ADDRESS:<br>CITY/ST/ZIP/CO: | ROBIN SMITH<br>DIRECTOR<br>THE ENTREPRENEURS' SOURCE<br>1025 JEFFRIES WAY<br>MIDLOTHIAN, VA 23114- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |

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| NAME: SHARON TAYLOR<br>TITLE: DIRECTOR<br>ADDRESS: GOODWILL<br>6301 MIDLOTHIAN TURNPIKE<br>CITY/ST/ZIP/CO: RICHMOND, VA 23225- | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
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| NAME: CATHY GOODEN<br>TITLE: SECRETARY<br>ADDRESS: 1124 SPIREA RD<br>CITY/ST/ZIP/CO: RICHMOND, VA 23236- | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

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| <u>/s/ KAREN BUCHANAN</u>                           | <u>KAREN BUCHANAN, PRESIDENT</u> | <u>9/30/2011</u> |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE             |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.